

STATEMENT OF ECONOMIC INTERESTS

Date Received  
Official Use Only

RECEIVED

RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION  
COVER PAGE

11 JAN 27 PM 12:10

Please type or print in ink.

11 APR -6 PM 3:12

NAME OF FILER (LAST) (FIRST) (MIDDLE) CITY  
Wapner Alan D. CITY CLERK/RECORDS

1. Office, Agency, or Court

Agency Name

City Council

Division, Board, Department, District, if applicable

Your Position

City Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of Ontario

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is through December 31, 2010.

☐ Leaving Office: Date Left (Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date

☐ The period covered is through the date of leaving office.

☐ Candidate: Election Year Office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 5

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is  
I certify under penalty of perjury under the laws of the State of California that

Date Signed January 25, 2011  
(month, day, year)

Signature

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name  Alan D. Wapner

**▶ 1. BUSINESS ENTITY OR TRUST**

Alan D. Wapner & Associates

Name

2733 S. Monterey Place Ontario, CA 91761

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

Security/Government Relations Consulting

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/10    \_\_\_\_/\_\_\_\_/10  
ACQUIRED    DISPOSED

NATURE OF INVESTMENT

☒ Sole Proprietorship    ☐ Partnership    ☐ Other

YOUR BUSINESS POSITION Owner

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

- ☐ \$0 - \$499    ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000    ☒ OVER \$100,000  
☐ \$1,001 - \$10,000

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)**

Caltrop Corporation, Bingo Innovations of California, Inc.

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT    ☐ REAL PROPERTY

Name of Business Entity or

Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/10    \_\_\_\_/\_\_\_\_/10  
ACQUIRED    DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_ Yrs. remaining    ☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/10    \_\_\_\_/\_\_\_\_/10  
ACQUIRED    DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship    ☐ Partnership    ☐ Other

YOUR BUSINESS POSITION \_\_\_\_\_

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

- ☐ \$0 - \$499    ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000    ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)**

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT    ☐ REAL PROPERTY

Name of Business Entity or

Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/10    \_\_\_\_/\_\_\_\_/10  
ACQUIRED    DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_ Yrs. remaining    ☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Alan D. Wapner
---

<p>► NAME OF SOURCE</p> <p><u>Ontario Fire Management Association</u></p> <p>ADDRESS (Business Address Acceptable)</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>12 / 27 / 10</u></td> <td><u>\$ 55.00</u></td> <td><u>Gift basket</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>12 / 27 / 10</u>	<u>\$ 55.00</u>	<u>Gift basket</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<p>► NAME OF SOURCE</p> <p><u>ECHL Properties, LLC</u></p> <p>ADDRESS (Business Address Acceptable)</p> <p><u>116 Village Blvd, Suite 230 Princeton, NJ 08540</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <p><u>Minor League Hockey League</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>1 / 18 / 10</u></td> <td><u>\$ 148.00</u></td> <td><u>All Star Game Gift Bag</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>1 / 18 / 10</u>	<u>\$ 148.00</u>	<u>All Star Game Gift Bag</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>12 / 27 / 10</u>	<u>\$ 55.00</u>	<u>Gift basket</u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>1 / 18 / 10</u>	<u>\$ 148.00</u>	<u>All Star Game Gift Bag</u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<p>► NAME OF SOURCE</p> <p><u>League of California Cities</u></p> <p>ADDRESS (Business Address Acceptable)</p> <p><u>1400 K Street Sacramento, CA 95814</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>1 / 22 / 10</u></td> <td><u>\$ 30.18</u></td> <td><u>Lunch</u></td> </tr> <tr> <td><u>4 / 9 / 10</u></td> <td><u>\$ 34.21</u></td> <td><u>Lunch</u></td> </tr> <tr> <td><u>6 / 18 / 10</u></td> <td><u>\$ 35.00</u></td> <td><u>Lunch</u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>1 / 22 / 10</u>	<u>\$ 30.18</u>	<u>Lunch</u>	<u>4 / 9 / 10</u>	<u>\$ 34.21</u>	<u>Lunch</u>	<u>6 / 18 / 10</u>	<u>\$ 35.00</u>	<u>Lunch</u>	<p>► NAME OF SOURCE</p> <p><u>Taser International</u></p> <p>ADDRESS (Business Address Acceptable)</p> <p><u>17800 N. 85th St. Scottsdale, AZ 85255-6311</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <p><u>Manufacturer of police technology</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>10 / 2 / 10</u></td> <td><u>\$ 50.00</u></td> <td><u>Dinner</u></td> </tr> <tr> <td><u>12 / 1 / 10</u></td> <td><u>\$ 50.00</u></td> <td><u>Dinner</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>10 / 2 / 10</u>	<u>\$ 50.00</u>	<u>Dinner</u>	<u>12 / 1 / 10</u>	<u>\$ 50.00</u>	<u>Dinner</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>1 / 22 / 10</u>	<u>\$ 30.18</u>	<u>Lunch</u>																							
<u>4 / 9 / 10</u>	<u>\$ 34.21</u>	<u>Lunch</u>																							
<u>6 / 18 / 10</u>	<u>\$ 35.00</u>	<u>Lunch</u>																							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>10 / 2 / 10</u>	<u>\$ 50.00</u>	<u>Dinner</u>																							
<u>12 / 1 / 10</u>	<u>\$ 50.00</u>	<u>Dinner</u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<p>► NAME OF SOURCE</p> <p><u>Oliver McMillan</u></p> <p>ADDRESS (Business Address Acceptable)</p> <p><u>733 8th Avenue San Diego, CA 92101</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <p><u>Developer</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>5 / 23 / 10</u></td> <td><u>\$ 75.00</u></td> <td><u>Dinner</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>5 / 23 / 10</u>	<u>\$ 75.00</u>	<u>Dinner</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<p>► NAME OF SOURCE</p> <p><u>Panattoni Development Corporation</u></p> <p>ADDRESS (Business Address Acceptable)</p> <p><u>34 Tesla, Suite 200 Irvine, CA 92618</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <p><u>Developer</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>5 / 24 / 10</u></td> <td><u>\$ 75.00</u></td> <td><u>Dinner</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>5 / 24 / 10</u>	<u>\$ 75.00</u>	<u>Dinner</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>5 / 23 / 10</u>	<u>\$ 75.00</u>	<u>Dinner</u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>5 / 24 / 10</u>	<u>\$ 75.00</u>	<u>Dinner</u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

Name

Alan D. Wapner

► NAME OF SOURCE

Related Companies of California

ADDRESS (Business Address Acceptable)

18201 Von Karman Ave. Suite 900 Irvine, CA 92612

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Developer

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10 / 28 / 10</u>	<u>\$ 97.50</u>	<u>Commemorative Clock</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

David Turch & Associates

ADDRESS (Business Address Acceptable)

517 2nd Street, Northeast Washington, D.C. 20002

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Federal Lobbyist

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3 / 15 / 10</u>	<u>\$ 50.00</u>	<u>Dinner</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

Comments: \_\_\_\_\_

**SCHEDULE E**  
**Income – Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name Alan D. Wapner

- **Reminder – you must mark the gift or income box.**
- **You are not required to report income from government agencies.**
- **You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.**

<p>▶ NAME OF SOURCE City of Guamuchil, Sinaloa, Mexico ADDRESS (Business Address Acceptable) CITY AND STATE BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3) Municipality DATE(S): 2 / 12 / 10 - 2 / 16 / 10 AMT: \$ 540.00 (If applicable) TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income DESCRIPTION: Sister City Trip Food &amp; Lodging</p>	<p>▶ NAME OF SOURCE ADDRESS (Business Address Acceptable) CITY AND STATE BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3) DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____ (If applicable) TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income DESCRIPTION:</p>
<p>▶ NAME OF SOURCE ADDRESS (Business Address Acceptable) CITY AND STATE BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3) DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____ (If applicable) TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income DESCRIPTION:</p>	<p>▶ NAME OF SOURCE ADDRESS (Business Address Acceptable) CITY AND STATE BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3) DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____ (If applicable) TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income DESCRIPTION:</p>

Comments: \_\_\_\_\_